BI (Official Form 1) (04/13) Case 16-11	932 DOC 1	Filed 04/07/16			7/16 14:59:20) Desc	Main	-
Noi	rthern District	of Illinois	Page 1	of 50	VOI	UNTARY PI	ETITION	
Name of Debtor (if individual, enter L Thomas, Donald	ast, First, Middle):		Name of J	oint Debtor	(Spouse) (Last, First	, Middle):		
All Other Names used by the Debtor is (include married, maiden, and trade na	All Other I	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
Last four digits of Soc. Sec. or Individ (if more than one, state all): 0791		TIN)/Complete EIN	Last four d	ligits of Soc an one, state	. Sec. or Individual-	laxpayer I.D.	(ITIN)/Complete EIN	
Street Address of Debtor (No. and Stre	et, City, and State):		Street Add	ress of Joint	t Debtor (No. and Str	eet, City, and	State):	-
143 N. Mason Ave., Apt. 2d Chicago, IL 60644		ZID GODD						
County of Residence or of the Principa	l Place of Business:	ZIP CODE 60644	County of	Residence o	or of the Principal Pla	ce of Busines	ZIP CODE	_
Cook Mailing Address of Debtor (if different	from street address	}·			int Debtor (if differen			_
(same as above)		,	Muning Ac	mic35 OI 101	int exercise (ii differen	it from street i	address):	
Loggious of Discipal Asset Charles		ZIP CODE					ZIP CODE	
Location of Principal Assets of Busines	ss Debtor (ii differer	it from street address above	e):				ZIP CODE	
Type of Debtor (Form of Organizati (Check one box.)	on)	(Check one box.)	of Business		Chapter of B the Petiti	ankruptcy Co on is Filed (C	ode Under Which heck one box.)	
☐ Individual (includes Joint Debtors See Exhibit D on page 2 of this for Corporation (includes LLC and L Partnership ☐ Other (If debtor is not one of the a this box and state type of entity be	s) rm. LP) above entities, check	11 U.S.C. § 10 Railroad Stockbroker	eal Estate as def 1(51B)		Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13	Re Ma □ Ch Re	napter 15 Petition for cognition of a Foreign ain Proceeding apter 15 Petition for cognition of a Foreign main Proceeding	
Chapter 15 Debtor		Tax-Exe	mpt Entity if applicable.)			Nature of De		1
Country of debtor's center of main inter Each country in which a foreign proceed against debtor is pending:	ding by, regarding, c	Debtor is a tax-	exempt organiza the United State al Revenue Cod	tion es	Debts are primardebts, defined in § 101(8) as "incuindividual primal personal, family, household purpos	11 U.S.C. arred by an rily for a or	ox.) Debts are primarily business debts.	
	(Check one box.)		Check one i	box:	Chapter 11 I	Debtors		1
Full Filing Fee attached.			Debtor	r is a small b	business debtor as de	fined in 11 U.	S.C. § 101(51D).	
Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,400,025 (concent or bised to adjust or affiliates) are less than \$2,400,025 (concent or bised to adjust or affiliates).						excluding debts owed to		
Filing Fee waiver requested (application for the co	cable to chapter 7 in ourt's consideration.	dividuals only). Must See Official Form 3B.	on 4/0	1/16 and eve	ery three years there	after).		
			☐ Accept	is being file ances of the	ed with this petition.	prepetition fro	om one or more classes	
Statistical/Administrative Information						v(*).	THIS SPACE IS FOR	1
Debtor estimates that funds w Debtor estimates that, after an distribution to unsecured cred	y exempt property i	istribution to unsecured cress excluded and administrat	editors. ive expenses paid	d, there will	be no funds availab	le for	COURT USE ONLY	
Estimated Number of Creditors	200-999 1,000 5,000	5,001-		5,001- 0,000	50,001- 100,000	100,000 HER	ATES BANKRUPTCY CORN DISTRICT OF ILLING	OURT DIS
Estimated Assets	\$500,001 \$1,00 to \$1 to \$1 million millio	0,001 \$10,000,001 \$ 0 to \$50 t	\$50,000,001 \$ 0 \$100 to] 100,000,001 5 \$500 nillion	5500,000,001 to \$1 billion J l		R 0 7 2016 ALLSTEADT, CL	ERK
Stimated Liabilities	\$500,001 \$1,00 to \$1 to \$10 million million	0,001 \$10,000,001 \$ to \$50 to	s \$100 to] 100,000,001 \$500 tillion	\$500,000,001 to \$1 billion	More than \$1 billion		

B1 (Official F Voluntary I	orm 1) (04/13) 6 11932 Doc 1 Filed 04/07/16	Entered 04/07/16 14:59:20	Desc Main
(This page n	sust be completed and filed in every case.) Document	Page 2 mts (): \\	Page 2
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two offens of the	95
Location Where Filed:		Case Number:	
Location Where Filed:		Case Number:	Date Filed: 04/04/2008
Where I ned.			Date Filed:
Name of Deb	Pending Bankruptcy Case Filed by any Spouse, Partner, or A	Case Number:	additional sheet.)
District:			Date Filed:
		Relationship:	Judge:
of the Securiti	Exhibit A leted if debtor is required to file periodic reports (e.g., forms 10K and expecurities and Exchange Commission pursuant to Section 13 or 15(d) es Exchange Act of 1934 and is requesting relief under chapter 11.) A is attached and made a part of this petition.	Exhibit (To be completed if debte whose debts are primarily I, the attorney for the petitioner named in the informed the petitioner that [he or she] may pof title 11, United States Code, and have exp such chapter. I further certify that I have delive by 11 U.S.C. § 342(b).	or is an individual consumer debts.) foregoing petition, declare that I have roceed under chapter 7, 11, 12, or 13
		Signature of Attorney for Debtor(s) (I	Date)
Exhibit D f this is a joint		complete and attach a separate Exhibit D.) etition.	
Exhibit D	, also completed and signed by the joint debtor, is attached and made a par	rt of this petition.	
Ø	Information Regarding to (Check any applic Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 days to	able box.)	180 days immediately
	There is a bankruptcy case concerning debtor's affiliate, general partner		
	Debtor is a debtor in a foreign proceeding and has its principal place of no principal place of business or assets in the United States but is a de District, or the interests of the parties will be served in regard to the relief	business or principal assets in the United State	s in this District, or has all or state court] in this
,	Certification by a Debtor Who Resides as (Check all applicab	ie boxes.)	
	Landlord has a judgment against the debtor for possession of debtor's	residence. (If box checked, complete the follow	ving.)
	<u>//</u>	lame of landlord that obtained judgment)	
	(A	ddress of landlord)	
	Debtor claims that under applicable nonbankruptcy law, there are circuentire monetary default that gave rise to the judgment for possession, a	•	nitted to cure the
	Debtor has included with this petition the deposit with the court of any of the petition.	rent that would become due during the 30-day p	nd Deriod after the filing
	Debtor certifies that he/she has served the Landlord with this certificati		-

31 (C	Official Form 1) (04/13) Unitary Position Case 16-11932 Duc 1 Filed 04/07/18	Page 3
Vol	untary retition	
(Thi	a page must be completed and fred in every case.	Page 3 of 50
		atures
	Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
and [If] chos or 1	clare under penalty of perjury that the information provided in this petition is true correct. Detitioner is an individual whose debts are primarily consumer debts and has sen to file under chapter 7, 11, 12, and title 11, United States Code, understand the relief available under each such	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)
[If n	oter, and choose to proceed under chapter 7. no attorney represents me and no bankruptcy petition preparer signs the petition] I be obtained and read the notice required by 11 U.S.C. § 342(b).	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
l re	quest relief in accordance with the chapter of title 11, United States Code, cified in this petition Signature of Debtor	Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X (Signature of Foreign Representative)
	organization botton	(organist of 1 design respectively)
X	Signature of Joint Deltor (708) (603 - 0284 Telephone Number (if not represented by attorney) A 2/24/16 Date	(Printed Name of Foreign Representative) Date
	Signature of Attorney*	Signature of Non-Attorney Bankruptcy Petition Preparer
	Signature of Attorney	Signature of Non-Attorney Danki upicy I custom I reparer
X	Signature of Attorney for Debtor(s) Printed Name of Attorney for Debtor(s) Firm Name	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
	Address	uttivite.
	Telephone Number	Printed Name and title, if any, of Bankruptcy Petition Preparer
	Date	
certi	a case in which § 707(b)(4)(D) applies, this signature also constitutes a ification that the attorney has no knowledge after an inquiry that the information has schedules is incorrect.	Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
	Signature of Debtor (Corporation/Partnership)	
I deand debt	clare under penalty of perjury that the information provided in this petition is true correct, and that I have been authorized to file this petition on behalf of the or.	Address
	debtor requests the relief in accordance with the chapter of title 11, United States e, specified in this petition.	Signature
X		Date
-	Signature of Authorized Individual	
	Printed Name of Authorized Individual	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.
	Title of Authorized Individual	Names and Social-Security numbers of all other individuals who prepared or assisted
	Date	in preparing this document unless the bankruptcy petition preparer is not an individual.
		If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
		A bankruptcy petition preparcr's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

B 1D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re Thomas, Donald	Case No
Debtor	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.

© 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

Page 2

was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] I am a ciscular veteran and have been hospitalized for a weak or more teveral times in the last 6 months. I was hospital I need to tite bankruptcy immediately to prevent creditors from a check. I have restricted to work a will be able to pay for the bankruptcy counseling them. Otherwise, I will be able to pay for the last counseling within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.
without that receiving a credit counseling of felling.
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: Ton Shomas
Date: 02/2/4/16

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 6 of 50

Fill in this in	formation to ide	entify your case:		ing programme
Debtor 1	DONALD		THOMAS	
·	First Name	Middle Name	Last Name	·
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
		or the: Northern District of		
United States I	bankrupicy Count ic	or the: Northern District of	IIIIIOIS	
Case number	(if known)			
	(II KIIOWII)			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B. 1b. Copy line 62, Total personal property, from Schedule A/B. 1c. Copy line 63, Total of all property on Schedule A/B. Sammarize Your Liabilities
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B. 1b. Copy line 62, Total personal property, from Schedule A/B. 1c. Copy line 63, Total of all property on Schedule A/B. \$ 2008
1c. Copy line 63, Total of all property on Schedule A/B
Part 2: Summarize Your Liabilities
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J

12/15

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Page 7 of 50 DONALD Debtor 1 Case number (if known)_

Decument

First Name Middle Name

Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?		
No. You have nothing to report on this part of the form. Check this box and submit this form to Yes	o the court with your other sch	nedules.
7. What kind of debt do you have?	erakkan kan salah dari kemenda di mengan di mengahan kemendah di mengangan kemelah di dipungan pertumban dan d Terakkan kemendah di mengan di mengan di mengan di mengan pendangan kemelah di dipungan pendangan dan dibungan	THE THE THE SHE WILLIAM THE
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes.	28 U.S.C. § 159.	
☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the this form to the court with your other schedules.	e form. Check this box and su	ıbmit
 From the Statement of Your Current Monthly Income: Copy your total current monthly income Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 		
	\$	5 O O
From Part 4 on <i>Schedule E/F,</i> copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	72.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)		
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		
9d. Student loans. (Copy line 6f.)	THE STATE OF THE S	
9e. Obligations ariging out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)		
9g. Total. Add lines 9a through 9f.	22.00	

Case 16-11932 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Doc 1 Document Page 8 of 50 Fill in this information to identify your case and this filing: DONALD Debtor 1 THOMAS First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land Investment property ☐ Timeshare City Describe the nature of your ownership ZIP Code Other interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Duplex or multi-unit building Street address, if available, or other description Creditors Who Have Claims Secured by Property. Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land Investment property City Timeshare Describe the nature of your ownership State ZIP Code interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions)

property identification number:

Other information you wish to add about this item, such as local

1.3	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
	area area area area area area area area	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
	City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		
	County	Debtor 1 only		
		Debtor 2 only Debtor 1 and Debtor 2 only	Chack if this is as	ommunity property
		At least one of the debtors and another	(see instructions)	mmanity property
		Other information you wish to add about this its property identification number:	em, such as local	
		Il of your entries from Part 1, including any entries		\$
Part 2:	Describe Your Vehicles			
Do you you own	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle , vans, trucks, tractors, sport utility vehicles to es	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see		ims or exemptions. Put I claims on Schedule D: is Secured by Property.
Do you you own 3. Cars 1 N 1 Y 3.1.	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles to lese. Make: Model: Year: Approximate mileage:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	ims or exemptions, Put I claims on Schedule D: is Secured by Property. Current value of the
Do you you own 3. Cars 1 N 3.1.	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles to less. Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clai	ims or exemptions. Put I claims on Schedule D: is Secured by Property. Current value of the portion you own? \$
Do you you own 3. Cars 1 N 3.1.	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles to less. Make: Model: Year: Approximate mileage: Other information:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured clathe amount of any secured clathe amount of any secured	ims or exemptions. Put I claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$
Do you you own 3. Cars 1 N 3.1.	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles to less. Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe here: Make:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured Creditors Who Have Claim	ims or exemptions. Put I claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$
Do you you own 3. Cars 1 N 3.1.	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle , vans, trucks, tractors, sport utility vehicles lowes. Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe here: Make: Model: Year:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured clathe amount of any secured clathe amount of any secured	ims or exemptions. Put I claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$
Do you you own 3. Cars 1 N 3.1.	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle, vans, trucks, tractors, sport utility vehicles to less. Make: Model: Year: Approximate mileage: Other information: own or have more than one, describe here: Make: Model: Model:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the	ims or exemptions. Put it claims on Schedule D: is Secured by Property. Current value of the portion you own? \$

4.

***********	First Name Middle Name	Last Name Document Page 10 of 90 number (a	(known)	
3,3.	Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured ci the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ms Secured by Property.
	Approximate mileage: Other information:	— □ Debtor 1 and Debtor 2 only — □ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Check if this is community property (see instructions)	\$	\$
3.4.	Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property.	
	Approximate mileage: Other information:	 □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	Current value of the entire property?	Current value of the portion you own?
		Check if this is community property (see instructions)	\$	\$
Examp No	oles: Boats, trailers, motors, persona	s and other recreational vehicles, other vehicles, and access al watercraft, fishing vessels, snowmobiles, motorcycle accesso	sories ries	·
Examp No No Ye 4.1. I	oles: Boats, trailers, motors, persona	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	po not deduct secured claim the amount of any secured Creditors Who Have Claim.	claims on Schedule D
Example No Pe	oles: Boats, trailers, motors, persona s Make: Model:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clai the amount of any secured Creditors Who Have Claim.	claims on Schedule D.

Other information: At least one of the debtors and another Current value of the entire property? portion you Check if this is community property (see instructions) Check if this is community property (see instructions) S	Model: Year:	Debtor 1 only Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property.		
Model: Year: Debtor 1 only Debtor 2 only Debtor 2 only Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Creditors Who Have Claims Secured by Proceedings Who Have Claims Who Have Claims Secured by Proceedings	Other information:	☐ Check if this is community property (see		Current value of the portion you own?	
Year: Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Current value of the entire property? Current value of the entire property? Current value of the entire property? S	2. Make:	Who has an interest in the property? Check one. Debtor 1 only	the amount of any secure	claims on Schedule D	
instructions)		Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the	Current value of the portion you own?	
·		instructions)		\$	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Pist Name Middle Name Last Name Document Page 11 of 50 umber (if known)______

Part 3	Describe	Your	Personal	and	Household	liame
r Call Library	Describe	i our	rtisynai	anu	nousenoid	Hems

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims
		or exemptions.
6.	Household goods and furnishings	+ **
	Examples: Major appliances, furniture, linens, china, kitchenware	•
	☑ No ☐ Yes. Describe	1
	Tes. Describe	\$
7	Electronics	j
•	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	collections; electronic devices including cell phones, cameras, media players, games	
	☑ No	
	Yes. Describe	\$
		J
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No	nge er
	Yes. Describe	\$
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	
	Yes. Describe	
		\$
10.	Firearms	·
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	1
	2 No	
	Yes. Describe	\$
		T
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No □	24000
	Yes. Describe ONE(1) THREE QUARTHER LENGTH LEATHER COAT	\$
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	m every park control
	2 No	
	Yes. Describe	\$
13	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	No Describe	:
	Yes. Describe	\$
14.4	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	
	☐ Yes, Give specific	\$
	information	Ψ
15	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	, 200,00
	for Part 3. Write that number here	*

Case 16-11932 Doc 1 Filed 04/Q7/16 Entered 04/07/16 14:59:20 Desc Main Page 12 of \$50 mber (if known) Page 12 of \$50 mber (if known)

Do you own or have an	/ legal or equitable interest in		ng?		portion y	uct secured claim
16. Cash		uggestet i vilk e tred kureke utkareg for				
Examples: Money you	ı have in your wallet, in your hon	ne, in a safe deposi	t box, and on hand wher	you file your petition		
□ No						50.00
2 Yes				Cash:	\$	50.00
and other	savings, or other financial accou similar institutions. If you have rr	ints; certificates of outtiple accounts wit	deposit; shares in credit th the same institution, lis	unions, brokerage house st each.	s,	
☑ No ☐ Yes		Institution name:				
	17.1. Checking account:	TCF BANK	First #977	1049340	. \$	00
	17.2. Checking account:				_ \$	
	17.3. Savings account:				_ \$	
	17.4. Savings account:				\$ <u></u>	
	17.5. Certificates of deposit:				- \$ <u> </u>	
•	17.6. Other financial account:				- \$ <u>`</u>	
	17.7. Other financial account:				- \$	
	17.8. Other financial account:				- \$ <u></u>	
	17.9. Other financial account:				- \$	
	, or publicly traded stocks					
Examples: Bond funds No	s, investment accounts with brok	erage firms, money	market accounts			
Yes	Institution or issuer name:					
					\$	
					\$	
					_ \$	
					Ψ	
					Ψ	
	stock and interests in incorpo	rated and unincor	porated businesses, in	cluding an interest in	¥	
19. Non-publicly traded an LLC, partnership, ☑ No	and joint venture	rated and unincor	porated businesses, in	cluding an interest in % of ownership:	V	
an LLC, partnership, ☑ No ☑ Yes. Give specific		rated and unincor	porated businesses, in		\$	
an LLC, partnership	and joint venture Name of entity:	rated and unincor	porated businesses, in	% of ownership:	\$ \$	

Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main

Last Name Document Page 13 of 50e number (if known)_______

	•	annot transfer to someone by signing or delivering them.	
No Yes. Give specific information about	Issuer name:		
them			\$
			\$
			\$
. Retirement or pension	accounts		
Examples: Interests in IF	RA, ERISA, Keogh, 4	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	·
U No			
Yes. List each account separately.	Type of account:	Institution name:	
•			
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		· · · · · · · · · · · · · · · · · · ·
	reduction account,	<u>reks</u>	n 1 00 00
Security deposits and pi	Additional account: repayments deposits you have ma	FERS	\$ 600.00 \$
Security deposits and pi Your share of all unused of Examples: Agreements w	Additional account: repayments deposits you have ma		\$ 600.00
Security deposits and pa Your share of all unused of Examples: Agreements w companies, or others	Additional account: repayments deposits you have ma	ade so that you may continue c	\$ 600.00
Security deposits and particles of all unused of all unused of all unused of amples: Agreements wompanies, or others No	Additional account: repayments deposits you have ma ith landlords, prepaid	ade so that you may continue c	\$ 600.00 \$
Security deposits and particular share of all unused of all unused of a security was a security of the securit	Additional account: repayments deposits you have ma ith landlords, prepaid	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	\$
Security deposits and progression of all unused of Examples: Agreements we companies, or others No Yes	Additional account: repayments deposits you have ma ith landlords, prepaid	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	\$ 600.00 \$\$
Security deposits and payour share of all unused of Examples: Agreements we companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$
Security deposits and programmer of all unused of Examples: Agreements we companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$
Security deposits and programmer of all unused of Examples: Agreements with the companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$
Security deposits and payour share of all unused of Examples: Agreements whompanies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$
Security deposits and profour share of all unused of Examples: Agreements whompanies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$
Security deposits and particles of all unused of Examples: Agreements with the companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Instite Electric: Gas: Heating oil: Security deposit on rentae Prepaid rent:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$
Security deposits and property of all unused	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Felephone: Vater:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$
Security deposits and programmer of all unused of Examples: Agreements we companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Vater:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$
Security deposits and property of all unused of all unused of all unused of a companies. Agreements we companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Felephone: Vater: Lented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$
Security deposits and property of the security of the security deposits and property of the security o	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Felephone: Vater: Lented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$
Security deposits and property of all unused of Examples: Agreements we companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Telephone: Vater: Lented furniture: periodic payment of rental	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$
Security deposits and programmer of all unused of Examples: Agreements we companies, or others No Yes	Additional account: repayments deposits you have maith landlords, prepaid Insti Electric: Gas: Heating oil: Security deposit on renta Prepaid rent: Felephone: Vater: Lented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications tution name or individual:	\$\$ \$\$ \$\$

DONALD 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main

Last Name Document Page 14 6 14:59:20 Desc Main

26 U.S.C. §§ 530(b)(1), 529	RA, in an account in a qualified ABLE program, or under a qualified state t A(b), and 529(b)(1).	. •
☑ No ☐ Yes	" Institution name and description. Separately file the records of any interests	11 U.S.C. § 521(c):
		\$
		——————————————————————————————————————
25. Trusts, equitable or future exercisable for your benef	interests in property (other than anything listed in line 1), and rights or po it	wers
🗹 No		
Yes. Give specific information about them		\$
	marks, trade secrets, and other intellectual property names, websites, proceeds from royalties and licensing agreements	
☑ No		
Yes. Give specific information about them		\$
27. Licenses, franchises, and Examples: Building permits,	other general intangibles exclusive licenses, cooperative association holdings, liquor licenses, profession	al licenses
☑ No		
Yes. Give specific		Andrew Angles of Property and Angles of Angles Angl
information about them.		\$
ASSESSMENT OF COMMENT OF STREET		
Money or property owed to yo	ou.	Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you	ou'.	portion you own? Do not deduct secured
28. Tax refunds owed to you No		portion you own? Do not deduct secured
28. Tax refunds owed to you No Yes. Give specific inform	nation Fe	portion you own? Do not deduct secured
28. Tax refunds owed to you 20 No 21 Yes. Give specific inform about them, including you already filed the	nation ng whether e returns	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you ☑ No ☐ Yes. Give specific inform about them, includi	nation ng whether e returns	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you 20 No 21 Yes. Give specific inform about them, including you already filed the	nation ng whether e returns	portion you own? Do not deduct secured claims or exemptions. deral: ste: \$
28. Tax refunds owed to you No Yes. Give specific inform about them, includi you already filed the and the tax years	nation ng whether e returns	portion you own? Do not deduct secured claims or exemptions. deral: ste: \$
28. Tax refunds owed to you No Yes. Give specific inform about them, includi you already filed the and the tax years	nation ng whether e returns Lo	portion you own? Do not deduct secured claims or exemptions. deral: ste: \$
28. Tax refunds owed to you 20 No Yes. Give specific inform about them, includi you already filed the and the tax years 29. Family support Examples: Past due or lump	nation ng whether e returns Sta Lo sum alimony, spousal support, child support, maintenance, divorce settlement,	portion you own? Do not deduct secured claims or exemptions. deral: ste: s cal: property settlement
28. Tax refunds owed to you ✓ No Yes. Give specific inform about them, includi you already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No	nation ng whether e returns Sta Lo sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: ste: property settlement nony: \$
28. Tax refunds owed to you ✓ No Yes. Give specific inform about them, includi you already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No	nation ng whether e returns sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you ✓ No — Yes. Give specific inform about them, including your already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No	nation ng whether e returns Str Lo sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you ✓ No Yes. Give specific inform about them, includi you already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No	sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you ✓ No Yes. Give specific inform about them, includi you already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No	sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you ✓ No Yes. Give specific inform about them, including your already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No Yes. Give specific inform 30. Other amounts someone of Examples: Unpaid wages, d	sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you ✓ No Yes. Give specific inform about them, including your already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No Yes. Give specific inform 30. Other amounts someone of Examples: Unpaid wages, d	sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$
28. Tax refunds owed to you ✓ No ☐ Yes. Give specific inform about them, includi you already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No ☐ Yes. Give specific inform 30. Other amounts someone of Examples: Unpaid wages, described Social Security be	sum alimony, spousal support, child support, maintenance, divorce settlement, nation	portion you own? Do not deduct secured claims or exemptions. deral: \$

DONALD 16-11932 Doc 1 Filed 04/97/16 Entered 04/07/16 14:59:20 Desc Main Page 15 of 50

and a construction of the second contract of	Control of the contro	respectively, comment or superior programming a control of the superior of the		and the second
31. Interests in insurance	policies	ce: health savings account (HSA	A); credit, homeowner's, or renter's insurance	
	bility, or me madran	oc, nomin buttings about it (i.e.	,, -, -, -, -, -, -, -, -, -, -, -, -, -	
☑ No				
Yes. Name the insu		Company name:	Beneficiary:	Surrender or refund value:
of each policy	and list its value			\$
				\$
				\$
32 Any interest in prope	rty that is due you	from someone who has died		
If you are the beneficia property because some	ry of a living trust, e	xpect proceeds from a life insura	ance policy, or are currently entitled to receive	
☑ No				novement and the second
Yes. Give specific i	information			
				\$
			woode a demand for naument	
33. Claims against third	parties, whether of	s, insurance claims, or rights to	or made a demand for payment	
	employment dispute	s, madrance diams, or righte to		
No No	t1			go and control of Antidag
Yes. Describe each	n claim			<u> </u>
			counterplains of the debtor and rights	
34. Other contingent and to set off claims	unliquidated clair	ns of every nature, including o	counterclaims of the debtor and rights	
Z No				
Yes. Describe each	h claim	часня на мерен бут на учений на пред на 18 маста в постой остройней филосова на постоя пред на 19 маста в постоя на 19 маста в 19 м		
Tes. Describe each	ii Clatifi			<u> </u>
35. Any financial assets	you did not alread	/ list		
☑ No				
Yes, Give specific	information			\$
·				
		f Dod A including any s	entries for names you have attached	
36. Add the dollar value	of all of your entri	es from Part 4, including any e	entries for pages you have attached	\$ 600.00
for Part 4. Write triat	number nere			
and Secretary 17, where the week has been the control of the control of the control of Secretary Secretary Secretary 19, 19, 19, 19, 19, 19, 19, 19, 19, 19,		regional and research and the final state of a state of the final state of a	and the state of the state of the second of the state of	ang kanasanan kanasan mengah pada sarah makan panan pada sarah sarah sarah sarah sarah sarah sarah sarah sarah
Part 5: Describe	Any Business	Related Property You ()wn or Have an Interest In. List an	y real estate in Part 1.
37. Do you own or have	any legal or equita	ble interest in any business-re	elated property?	
No. Go to Part 6.				
Yes. Go to line 38.	•			
				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
				The Common of the state of the
38. Accounts receivable	or commissions y	ou already earned		
☑ No				m. announcement
Yes. Describe		retor e for all he finished (e a formace, a a recommission of resident department of the commission of the finished finished (e a formace) and the commission of the commiss		
103. 5000/150	and the state of t			<u> </u>
39. Office equipment, fu	rnichinge and e:	nolies		
39. Omice equipment, tu	irinariniya, anu au ted computers, softwa	re, modems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, electronic de	vices
	The some paralog portion			
No		om anna dentina fina igan para anna para mana dengan paga paga anna ara anna paga ag a para anna anna anda ada ada ada ada anna a	ann ann deiricht der gegen an der der gegen der der gegen der gege	e
Yes. Describe	A principal of the control of the co			¥
	<u> </u>			

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main DNALD BLOWNS PAGE 16 094-50 Umber (# known)_______

40. Machinery, fixtures, equipment, supplies you use in business, a	and tools of your trade	
☑ No		
Yes. Describe		
		<u> </u>
		-
41. Inventory		
44 110	онительностиненностический выполнительностический полительностиностический выполнительностической выполнительности	1
Yes. Describe		\$
The state of the s		
and the contract of the contra	•	
42. Interests in partnerships or joint ventures		
☑ No		
Yes. Describe Name of entity:	% of ownership:	
	<u></u> %	\$
William 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	%	\$
***************************************		ę
WARRANCE CONTROL OF THE CONTROL OF T	%	Φ
43. Customer lists, mailing lists, or other compilations		
43. Customer lists, mailing lists, or other compilations		
Yes. Do your lists include personally identifiable information	n (as defined in 11 U.S.C. & 101/41A\\2	
· · · ·	if (as defined in 11 0.5.0. § 101(41A))?	
		7
Yes. Describe		\$
		Ψ
		-
44. Any business-related property you did not already list 7 No		
Yes. Give specific		
information		\$
		\$
The second secon	And the contract of the contra	
		\$
		\$
		\$
		•
		*
45. Add the dollar value of all of your entries from Part 5, including	any entries for pages you have attached	\$ 00
for Part 5. Write that number here	•	3
•		
		e mentica mentica mentica di deserva mentena de la men
Part 6: Describe Any Farm- and Commercial Fishing-Rel	lated Branastic You Own or Have an Interest In	
Part 6: Describe Any Farm- and Commercial Fishing-Rel If you own or have an interest in farmland, list it in Part		•
46. Do you own or have any legal or equitable interest in any farm-	or commercial fishing-related property?	
No. Go to Part 7.	or commercial norming related property.	
Yes. Go to line 47.		
Tes. Go to line 47.		
		Current value of the portion you own?
		Do not deduct secured claims
		or exemptions.
47. Farm animals		
Examples: Livestock, poultry, farm-raised fish		
☑ No		
☐ Yes		
		P

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 18 of 50

Fill in this in	nformation to ide	entify your case:		
Debtor 1	DONALD TH	IOMAS		
50000	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)) First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern District of II	linois	
Case number (If known)	<u></u>	Mills de Martin	unkumbb Training TV T	

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

For any prope	rty you list on Schedule A/B tl	hat you claim as exem	pt, fill in the information below.	
Brief descript	ion of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemptle
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	CLOTHING	\$	\$ 200.00	11U.S.C. S. 522(b)(3)
Schedule A/B:			any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	A 1970 To 1970

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main First Name Middle Name Last Name Document Page 19 of 50 number (# known)______

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	_ 🔲 \$	anna ann an t-aireann an t-airea Cann an t-aireann a
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		100% of fair market value, up to	
Brief description:	\$		The second secon
Line fromSchedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief			:
description: ————————————————————————————————————	\$	\$ \$ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Brief description: ————————————————————————————————————	\$	- \$	·
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ s	
Line from Schedule A/B:	The second secon	100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		Name of the second of the seco
ine from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 20 of 50

Fill in this in	formation to ide	entify your case:		
Debtor 1	DONALD TH	OMAS		
Debio; ;	First Name	Middle Name	Last Name	**************
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern District of Ill	inois	
Case number	**************************************			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecure portion If any
1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	•			
tanibol Suosi	As of the date you file, the claim is: Check all that apply.	,		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred	Last 4 digits of account number		egyelden jagangsik en gegen menensum menen kanstan minikat in kansta kensan in kansta kensan jagan menen kanst	opianionistalijopionistinomistalijosis
an y or on a consistence and a supplication of the consistence and the consistence and a supplication of the	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	-			
Aduther Otteet	As of the date you file, the claim is: Check all that apply.			
	Contingent			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	An agreement you made (such as mortgage or secured	•		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt		-		
Date debt was incurred	Last 4 digits of account number			

	information to identify	y your case.		50			
Debtor 1	DONALD First Name		THOMAS				
Debtor 2		Middle Name	Last Name				
(Spouse, if filing	g) First Name	Middle Name	Lasi Name				
United States	Bankruptcy Court for the:	Northern Dis	etriat of the -:				
Case number		. HOLLING DIS	outer of illinois				
(If known)		~ <u></u>					heck if this is
O#:-:-(r							mended filing
	orm 106E/F						Ū
Schedu	ule E/F: Cre	ditore	Who House	Unsecured			
Be as comple	te and accurate as		who nave	Unsecured	Claims		12/15
needed, copy any additional	partially secured clain the Part you need, fill i pages, write your nam	ms that are i it out, numb ne and case	isted in Schedule D: Co er the entries in the bo number (if known).	h PRIORITY claims and at could result in a claim ontracts and Unexpired creditors Who Have Claim oxes on the left. Attach to		いくいり ししいほうおこさき へき) Cobooliil
Elit III	t All of Your PRIORI	ITY Unsec	ured Claims				
. Do any cred	ditors have priority uns	secured clai	ims against vous		 		
	o Part 2.		-annocyour				
☐ Yes.	e Magazata tanan kenganakan dalam	25, 5, 5 - 2 - 5					
each claim lie	our priority unsecured	d claims. If a	creditor has more than	one priority unsecured cla rity and nonpriority amoun		the state of the North Association of the second	
nonpriority at	mounts. As much as pos	of claim it is,	If a claim has both prior	one priority unsecured cla rity and nonpriority amoun order according to the cre	im, list the creditor	separately for ea	ch claim. For
nusecrised Cl	aims, fill out the Continu	listian Dage	and in albitabelical	order according to the cre	ditor's name is	ere and show both u have more than	priority and
(For an expla	ination of each type of ci	claim, see the	instructions for this for	order according to the cre ne creditor holds a particu m in the instruction bookle	lar claim, list the of	ther creditors in Pa	art 3.
				w the manachor bookle	State Annual Control of the Control	SPOSSIONOS CONTRACTOR DE LA COLONIA DE L	
7				w sid matraction bookle) Total cla		Nonpriority
Priority Creditor				Section Dookie	Total cla	im Priority amount	Nonpriority amount
Priority Creditor			. Last 4 digits of acco	ount number	Total cla	amount	amount
				ount number	Total cla	amount	amount
	s Name		Last 4 digits of acco	ount numberincurred?	**Total cla	amount	amount
	s Name Street		Last 4 digits of acco When was the debt i As of the date you fi	ount number	**Total cla	amount	amount
Number	s Name Street State	ZIP Code	Last 4 digits of acco When was the debt in As of the date you find	ount numberincurred?	**Total cla	amount	amount
City Who incurred Debtor 1 or	Street State d the debt? Check one.		Last 4 digits of acco When was the debt in As of the date you fill Contingent Unliquidated	ount numberincurred?	**Total cla	amount	amount
Number City Who incurred Debtor 1 or	Street State State d the debt? Check one.		Last 4 digits of according to the date you file. As of the date you file. Contingent Unliquidated Disputed	ount numberincurred?	**Total cla	amount	amount
Number City Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar	Street State State I the debt? Check one. Inly In	ZIP Code	Last 4 digits of according to the date you fit. As of the date you fit. Contingent Unliquidated Disputed Type of PRIORITY u	ount numberincurred? le, the claim is: Check all the	**Total cla	amount	amount
Number City Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one	Street State State d the debt? Check one. nly nly nd Debtor 2 only of the debtors and another	ZIP Code	Last 4 digits of according to the date you fit. As of the date you fit. Contingent Unliquidated Disputed Type of PRIORITY under the digits of the date you fit.	ount numberincurred? le, the claim is: Check all the claim is: Check al	**************************************	amount	amount
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Number City Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if the	Street State d the debt? Check one. hly hly hly d Debtor 2 only e of the debtors and another his claim is for a commu	ZIP Code	Last 4 digits of according to the date you file. As of the date you file. Contingent Unliquidated Disputed Type of PRIORITY under the digits of the date you file. Taxes and certain of the digits of the death or printoxicated. Other. Specify	ount numberincurred? le, the claim is: Check all the claim is: Check al	**** **** Total cla **** at apply. nment	amount \$\$	amount _\$
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Number City Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if th Is the claim se Yes Priority Creditor's N Number Str	Street State d the debt? Check one. his of the debtors and another one claim is for a commulabject to offset? State State Zip he debt? Check one.	ZIP Code Prode	Last 4 digits of according to the date you file. As of the date you file. Contingent Unliquidated Disputed Type of PRIORITY understood to the date you file. Claims for death or printoxicated Other. Specify Last 4 digits of account when was the debt incompleted. Contingent Unliquidated Disputed	incurred? le, the claim is: Check all that the claim is: Check all that	Total cla \$at apply.	\$	amount _ \$
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Number City Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if th Is the claim so No Yes Priority Creditor's N Number Str City Who incurred to Debtor 1 only Debtor 2 only Debtor 1 and in At least one of	Street State State d the debt? Check one. Inly In	ZIP Code	Last 4 digits of accord When was the debt in As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the contingent of the date you file, Claims for death or printoxicated Other. Specify Last 4 digits of account when was the debt incompleted Contingent Unliquidated Disputed Type of PRIORITY unservices of the date you file, Contingent Unliquidated Disputed Type of PRIORITY unservices of the destrict	incurred? le, the claim is: Check all the claim: bligations ther debts you owe the governorsonal injury while you were carred? the claim is: Check all that secured claim: gations are debts you owe the cause are debts are deb	Total cla	\$	amount _ \$
Number City Who incurred Debtor 1 or Debtor 1 ar At least one Check if the claim set No Yes Priority Creditor's No Number Str City Who incurred the claim of Debtor 1 only Debtor 2 only Debtor 1 and if At least one of Check if this	State State d the debt? Check one. Inly Ind Debtor 2 only Ind of the debtors and another Inis claim is for a community abject to offset? State Zip the debt? Check one. Debtor 2 only I the debtors and another I claim is for a community	ZIP Code P Code	Last 4 digits of accord When was the debt in As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the contingent of the date you file, Claims for death or printoxicated Other. Specify Last 4 digits of account when was the debt ince As of the date you file, Contingent Unliquidated Disputed Type of PRIORITY uns Domestic support obliged Taxes and certain other Claims for death or per intoxicated	incurred? le, the claim is: Check all the claim: bligations ther debts you owe the government number	Total cla \$at apply. and apply.	\$	amount _ \$
Number City Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar At least one Check if th Is the claim so No Yes Priority Creditor's N Number Str City Who incurred to Debtor 1 only Debtor 2 only Debtor 1 and in At least one of	State State d the debt? Check one. Inly Ind Debtor 2 only Ind of the debtors and another Inis claim is for a community abject to offset? State Zip the debt? Check one. Debtor 2 only I the debtors and another I claim is for a community	ZIP Code P Code	Last 4 digits of accord When was the debt in As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the contingent of the date you file, Claims for death or printoxicated Other. Specify Last 4 digits of account when was the debt ince As of the date you file, Contingent Unliquidated Disputed Type of PRIORITY uns Domestic support obliged Taxes and certain other Claims for death or per intoxicated	incurred? le, the claim is: Check all the claim: bligations ther debts you owe the governorsonal injury while you were carred? the claim is: Check all that secured claim: gations are debts you owe the cause are debts are deb	Total cla \$at apply. and apply.	\$	amount _ \$

3. List in alphabetical order all of the creditors with nonpriorit	y unsecured claims. If the debtor has more than	an 6 creditors with nonpriority
unsecured claims, fill out and attach the Additional Page of Pan	t 2.	Amount of claim
3.1 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	s_2806, 32
220 Lea St. Suite 300	Contingent Unliquidated	
Des Plaines, IL. 60016	Disputed	
	Basis for the claim:	**************************************
Date or dates debt was incurred 11/25/2015	Is the-claim subject to offset?	
Last 4 digits of account number 5066	☐ Yes	
3.2 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	s 117.00
VA CHICAGO HEATH Core System	Contingent Unliquidated	
220 S. Damen Ave.	Disputed	
Chicago, IL. 60612	Basis for the claim:	MANIEN VA
Date or dates debt was incurred O2/09/2016	Is the claim subject to offset?	
Last 4 digits of account number 3386	☑ No ☐ Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	s 466,00
Edward Himes Jr. V.A Hospital	Check all that apply. — Contingent	\$ 166,00
Patient Billing - P.O. Box 5000 - 1360	UnliquidatedDisputed	
Himes IL 60141	Basis for the claim:	
Date or dates debt was incurred \(\text{Q2/01/2016}\)	Is the claim subject to offset?	
Last 4 digits of account number 0 2 5 3	Yes	
Nonpriority creditor's name and mailing address Social Security Administration	As of the petition filing date, the claim is: Check all that apply.	s_10,900
	Contingent Unliquidated	
Division of admin. Payment Service P.O. Box 47	Disputed	
Baltimore, MD 21235-0047	Basis for the claim:	AMPRICA
Date or dates debt was incurred 2012	Is the claim subject to offset?	
Last 4 digits of account number 0 7 9 1	U No □ Yes	
.5 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	s 1150.00
Opportunity Lan Finances	Contingent	
11 E. Addms St., Ste. 501 Chicago, IL. 60605	Unliquidated Disputed	
2. 000	Basis for the claim:	_
Date or dates debt was incurred 2013 - 2014	is the claim subject to offset? ☑ No	
	☐ Yes	
Last 4 digits of account number 2 1 9 1		
6 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$ 7400,00
6 Nonpriority creditor's name and mailing address United auto Credit	Check all that apply. Contingent	s 7400,00
6 Nonpriority creditor's name and mailing address Whitel Outo Credit P.O. Box 1450 1630 49	Check all that apply.	5 7400, OOPF a
Nonpriority creditor's name and mailing address United Auto Credit P.O. Box 1450 1630 49	Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	s 7400,00
Nonpriority creditor's name and mailing address United auto Credit P.O. Box 150 1630 49 Fort Worth, Texas 76161	Check all that apply. Contingent Unliquidated Disputed	s 7400, 00

Document Document Page 23 of 50 Entered 04/07/16 14:59:20 Desc Main

art 2:	Additional	Page
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Copy this page only if more space is needed. Continue number previous page. If no additional NONPRIORITY creditors exist,	ering the lines sequentially from the do not fill out or submit this page.	Amount of claim
3. Nonpriority creditor's name and mailing address Department of Veterans Affairs Department of Veterans Affairs Department of Veterans Affairs September 14930 St. Paul, MN Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset? No Yes	<u>\$ 6800,00</u>
3. Nonpriority creditor's name and mailing address Verizon Wireless 6451 W. Diversy Rue. Chicago, IL.	As of the petition filling date, the claim is: Check all that apply. Contingent Unliquidated Disputed	s 450.00
Date or dates debt was incurred	Basis for the claim: Is the claim subject to offset? No Yes	
3. Nonpriority creditor's name and mailing address Soco S. Fifth Rive, BH, 1. Hines, IL. 60141	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	<u>\$ 500,00</u>
Date or dates debt was incurred Last 4 digits of account number D 7 9 1	is the claim subject to offset? No Yes	
Nonpriority creditor's name and mailing address West Cook YMCR 255 S. Marion St. Oak Park, IL. 60302 Date or dates debt was incurred Last 4 digits of account number 0791	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Is the claim subject to offset? No Yes	s_516.00
Nonpriority creditor's name and mailing address Law Office of Hervill Harris III W. Jackson Blud. Chicago, IL, 60604	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Traffic Tick	s 488.00
Date or dates debt was incurred ROIS Last 4 digits of account number 519(531740	Is the claim subject to offset? No Pes	= 1 - mayo

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Name	Document	Page 24 of 50	

	t 2: List All Creditors with NONPRIORITY Unsecured		
3. I	ist in alphabetical order all of the creditors with nonpriority un	secured claims. If the debtor has more than 6	3 creditors with nonpriority
ĺ	unsecured claims, fill out and attach the Additional Page of Part 2.		Amount of claim
3.1	IECSI (Education loon Servicer) 181 Montaux Run Road Corac polis, PA 15108-9408	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	s 1327. 00
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? No Yes	
3.2	Nonpriority creditor's name and mailing address Nel net (Stutent Loan Servicer) P.O. Box 82561 Lincoln, NE 68501	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$ <u>5</u> 000.00
	Date or dates debt was incurred Last 4 digits of account number COGIG 5276691 002 187	Is the claim subject to offset? No. Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$
A MANAGEMENT OF THE PROPERTY O	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	and the second s
-	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? No Yes	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
A THE STATE OF THE	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Is the claim subject to offset? No Yes	
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
STATE LANGE OF THE PROPERTY OF	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Is the claim subject to offset? No Yes	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main

Document Page 25 of 50

Fill in this in	formation to ide	ntify your case:		
Debtor 1	DONALD		DMAS	
İ	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	r the: Northern District of II	linois	
Case number (If known)			··········	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?				
Creditor's name:	☐ Surrender the property.	□ No				
Description of	Retain the property and redeem it.	Yes				
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.					
	Retain the property and [explain]:					
Creditor's name:	☐ Surrender the property.	- 				
	Retain the property and redeem it.	☐ Yes				
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.					
	Retain the property and [explain]:					
Creditor's name:	☐ Surrender the property.	□ No				
Description of	Retain the property and redeem it.	☐ Yes				
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.					
	Retain the property and [explain]:					
Creditor's	☐ Surrender the property.	□ No				
name:	Retain the property and redeem it.	☐ Yes				
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.					
•	Retain the property and [explain]:					

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main DONALD THOMAS Page 26 of 50 Case number (If known)

DONALD First Name

Debtor 1

Middle Name

Part 2:	List Your	Unexpired	Personal	Property	Leases

□ No
Yes
☐ No
Yes
☐ No
☐ Yes
☐ No
☐ No ☐ Yes
Tes
☐ No
Yes
□ No
Yes
y intention about any property of my estate that secures a debt and any
Signature of Debtor 2

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main

Document Page 27 of 50

Fill in this information to identify your case:

Debtor Debtor Debtor 2 (Spouse If filing)

First Name Middle Name Last Name

Description:

Descri

☐ Check if this is an amended filing

Official Form 106G

Case number

(If known)

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

United States Bankruptcy Court for the: Northern District of Illinois

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for
 example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and
 unexpired leases.

	Person o	r company with	whom you	have the contract or lease	State what the contract or lease is for		
2.1	ACCIN	N PROPERTY	MANAG	EMENT LTD.	RENT		
***************************************	Name 1819 V	VEST GRAND	AVE.				
	Number	Street GO, IL 60612					
CONTRACTOR	City	h-gaga esing basisian esin merak esin merak	State	ZIP Code			
2.2							
and the second second	Name			NO MANAGEMENT OF THE PROPERTY			
Cont. Cont. Cont. Cont.	Number	Street					
	City		State	ZIP Code			
2.3	Control of the Control of Control of the Control of	Particular (Angelian de Company) - Service A Service A American Antonio (Antonio Antonio Anton	matilitati da a silitari da 1 dendera a um mar es caram	N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Name						
	Number	Street					
hashresnesse	City	rapidas progressis karakatarakan ini da	State	ZIP Code			
2.4							
	Name						
of Late Company of the Company of th	Number	Street			UNITATIVE TO THE PARTY OF THE P		
de la companya de la	City		State	ZIP Code			
2.5							
	Name			***************************************			
	Number	Street	***************************************				
	City		State	ZIP Code			

DONALD THOMAS

Document

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Page 28 of 50 Case number (if known)

Debtor 1

Last Name

	A	dditional Pa	ge if You H	ave More Contracts or Leases	
	Person o	r company wi	th whom you	have the contract or lease	What the contract or lease is for
2	66-4-404/494/4864/4				eren och meret grammingen er smyttigtet til til til til til til til til til ti
i	Name				
	Number	Street			_
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2	1,200,790,250,000,000,000,000,000,000,000,000,00	ETTIM KAPANA PETANGAN TA BIRKA PERMEBANA PANGANA PANGANA PANGA	with, 4 th horizon (4 E th horizon) (54 th 2000) 274 (7 E 1005) 177 k (270) (47	\$	中的人们,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就是一个人,我们就
	Name				_
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	City		State	ZIP Code	-
	- indicate and analysis in order to act	k signesk zegalande steutrissen hyger, i seune 191 gebreugen frigestissen pro	e since the extra entitle of a formation to be a strong as the contract of the	૮૯૦ લેના માના કરેલા કરેલા કરેલા કરતા કરતા કરતા કરતા કરતા કરતા કરતા કરત	
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	Name				_
	Number	Street			-
	City		State	ZiP Code	_
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	Name				-
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,.	City		State		
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		Sueet	···		_
	City		State	ZIP Code	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Fill in this information to identify your case: DONALD Debtor 1 THOMAS Last Nem Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (If known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) Z No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City State ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Name Schedule D, line ☐ Schedule E/F, line ____ Number Street ☐ Schedule G, line ____ City 3.2 Name ☐ Schedule D, line ____ Schedule E/F, line ____ Number ☐ Schedule G, line ____ City ZIP Code 3.3 Name Schedule D, line ☐ Schedule E/F, line ____ Number Street ☐ Schedule G, line _____ City State

Case 16-11932 DONALD	Doc 1		Entered 04/07/16 14:59:20 Page 30 of 50 Page 30 of 50	Desc Main
First Name Middle Name	Last Name	1 HOWAS	Case number (# known)	
Additional Bons to Link	Mara Cada	htare		

	A	Iditional Page to List More Codebtors	
	Column 1.	Your codebtor	Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3			Schedule D, line
	Name		☐ Schedule E/F, line
	Number	Street	Schedule G, line
	,,		
	City	State ZIP Code	
3			Schedule D, line
	Name		Schedule E/F, line
	Number	Street	Schedule G, line
	Number	Sueri	
	City	State ZIP Code	
3			Cabadula D. San
	Name		Schedule D, line
			Schedule E/F, line
	Number	Street	Confeder of the
	City	State ZIP Code	
		$+ 4.48 \pm 0.00 $	
3	Name		Schedule D, line
	Name		☐ Schedule E/F, line
	Number	Street	Schedule G, line
	City	State ZIP Code	
3			Cahadula D. Kas
	Name		Schedule D, line
			Schedule G, line
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	City	State ZIP Code	
3			D
	Name		Schedule D, line
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3			
	Name		Schedule D, line
			Schedule E/F, line
	Number	Stree!	Schedule G, line
	City	State ZIP Code	
3			
	Name		Schedule D, line
	•		Schedule E/F, line
	Number	Street:	Schedule G, line
		75.0-4-	
	City .	State ZIP Code	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 31 of 50 Fill in this information to identify your case: THOMAS DONALD Debtor 1 Lest Name First Name Debtor 2 Last Name Middle Name (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is: Case number (If known) An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: MM / DD / YYYY Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. **Describe Employment** Part 1: 1. Fill in your employment Debtor 2 or non-filing spouse Debtor 1 information. If you have more than one job, attach a separate page with Employed **Employed Employment status** information about additional Not employed ■ Not employed employers. Include part-time, seasonal, or self-employed work. MEDICAL SUPPORT ASST. Occupation Occupation may include student or homemaker, if it applies. HINES VA HOSPITAL Employer's name 5000 S. 5TH AVE. Employer's address Number Number Street 60141 HINES IL State ZIP Code ZIP Code State 5YRS. How long employed there? 5YRS. **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 2 or For Debtor 1 non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3,190.00 0.00 3. Estimate and list monthly overtime pay.

3,190.00

Calculate gross income. Add line 2 + line 3.

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main

Debtor 1

DONALD

DOCHOGOS

First Name

Middle Name

Last Name

Doch Middle Name

Last Name

Doch Middle Name

Doch Midd

}		For Debtor 1	For Debtor 2 or non-filing spouse	and the second section of the second second second second section second		
Copy line 4 here	→ 4.	\$_3,190.00	\$			
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	\$650.00	\$			
5b. Mandatory contributions for retirement plans	5b.	\$ <u>210.00</u>	\$			
5c. Voluntary contributions for retirement plans	5c.	\$ 75.00	\$			
5d. Required repayments of retirement fund loans	5d.	\$100.00	\$			
5e. Insurance	5e.	\$98.00	\$			
5f. Domestic support obligations	5f.	\$ <u>12.00</u>	\$			
5g. Union dues	5g.	\$60.00	\$			
5h. Other deductions. Specify: VCS DEDUCTION	5h.	+\$250.00	+ \$			
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	h. 6.	\$ <u>1,397.00</u>	\$			
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>1,790.00</u>	\$			
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$			
8b. Interest and dividends	8b.	\$0.00	\$			
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	dent		***************************************			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$			
8d. Unemployment compensation	8d.	\$0.00	\$			
8e. Social Security	8e.	\$0.00	\$			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		. 0.00				
	8f.	\$0.00_	\$			
8g. Pension or retirement income	8g.	\$0.00	\$			
8h. Other monthly income. Specify:	8h	+\$ <u>0.00</u>	+\$:		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9. [\$0.00	\$			
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 	10.	\$ <u>1,790.00</u> +	\$	\$ <u>1,790.00</u>		
 State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives. 	your de _l			-		
Do not include any amounts already included in lines 2-10 or amounts that are Specify:	not ava	ilable to pay expense	s listed in Schedule J.	s 0.00		
2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$\frac{1,790.00}{Combined}\$						
13. Do you expect an increase or decrease within the year after you file this	form?			monthly income		
Yes. Explain:						

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 33 of 50

Fill in this information to identif	y your case:	A STATE OF THE STA			
Debtor 1 DONALD	THOMAS	Check if this	e ie:		
First Name Debtor 2	Middle Name Last Name	_			
(Spouse, if filing) First Name	Middle Name Last Name	An ame	•	netition chapter 13	
United States Bankruptcy Court for the		supplement showing postpetition chapter 13 penses as of the following date:			
Case number(If known)		MM / DD	7 7777		
Official Form 106J		-			
Schedule J: Yo	our Expenses			12/15	
Be as complete and accurate as information. If more space is nee (if known). Answer every question	possible. If two married people are fili ded, attach another sheet to this form n.				
Part 1: Describe Your Ho	ousenoia	******			
1. Is this a joint case?					
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?				
☐ No					
Yes. Debtor 2 must	file Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.	es manuscus activistica manuscus manuscus de mandre de mandre de mandre de mandre de describe de describe de m	addis ar sear the Albert Albert as a death film the addisonable and Albert Albe	
2. Do you have dependents?	₩ No	Dependent's relationship to	Dependent's	Does dependent live	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?	
Do not state the dependents'				□ No □ Yes	
names.				□ No	
			***************************************	☐ Yes	
		***************************************	***************************************	□ No □ Yes	
				☐ No	
			<u></u>	Yes	
				□ No	
	andah kanala la			☐ Yes	
 Do your expenses include expenses of people other than yourself and your dependents? 			A, private dans space spacements are sensing to page surrivering and not more discount or continues on a so or	migration and the second se	
Part 2: Estimate Your Ongo	oing Monthly Expenses				
	ur bankruptcy filing date unless you a ankruptcy is filed. If this is a suppleme				
Include expenses paid for with no	on-cash government assistance if you	know the value of			
such assistance and have include	ed it on Schedule I: Your Income (Offi	cial Form 106l.)	Your expe	nses	
 The rental or home ownership any rent for the ground or lot. 	expenses for your residence. Include	first mortgage payments and	4. \$	900.00	
If not included in line 4:			•	0.00	
4a. Real estate taxes			4a. \$	0.00	
4b. Property, homeowner's, or	renter's insurance		4b. \$	0.00	
4c. Home maintenance, repair	, and upkeep expenses		4c. \$	150.00	
4d. Homeowner's association	or condominium dues		4d. \$	0.00	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 34 of 50

Debtor 1

DONALD First Name THOMAS

Last Name

Case number (if known)_

	1 834 Marillo			
		74 34 35	Your expenses	
			\$	0.00
5.	Additional mortgage payments for your residence, such as home equity loans	5.		
6.	Utilities:	5.0	\$	150.00
	6a. Electricity, heat, natural gas	6a. 6b.	e	0.00
	6b. Water, sewer, garbage collection	6c.	\$	150.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6d.	\$	
	6d. Other. Specify:		•	350.00
7.	Food and housekeeping supplies	7.	Φ	0.00
8.	Childcare and children's education costs	8.	\$	100.00
9.	Clothing, laundry, and dry cleaning	9.	Φ	35.00
10.	Personal care products and services	10.	Ф	150.00
11.	Medical and dental expenses	11.	Ψ	
12.		12.	\$	100.00
	Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
13	Charitable contributions and religious donations	14.	\$	0.00
14				
15	 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			0.00
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16	. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	Specify:			
1		17a.	\$	0.00
i	17a. Car payments for Vehicle 1	17b.	-	
	17b. Car payments for Vehicle 2	17c.	\$	
	17c. Other. Specify:	17d.		
	17d. Other, Specify:			
1	 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$	0.00
1	Other payments you make to support others who do not live with you.			ካ 0. <u>00</u>
	Specify: Student Logno	19	. \$ <u> </u>	1 0.00
,	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	ne.	_	0.00
_	20a. Mortgages on other property	20a		*
	20b. Real estate taxes	20b		
	20c. Property, homeowner's, or renter's insurance	20c	•	
	20d. Maintenance, repair, and upkeep expenses	20d		
	20e. Homeowner's association or condominium dues	20e		
	A STATE OF THE STA			

	Case 16-11932		iled 04/07/16 Document	Entere Page 35	d 04/07/16 1 5 of 50	L4:59:2	0 Desc	: Main	
Debtor 1	DONALD	DONALD THOMAS Case number				own)			
	First Name Middle Name	Last Name							
		4 - 4 24 - 44							
21. Othe	r. Specify:					21. -1	+\$	0.00	
22. Calcı	ulate your monthly expenses.					Transfer Annual Street Process	angay a nakadan nakada da miliya na hiya mayina hinada kapida yakida yili Affi Yikin m		
22a. /	Add lines 4 through 21.					22a.	\$	3320.00	
22b. (Copy line 22 (monthly expense	s for Debtor 2), if	any, from Official Fo	orm 106J-2		22b.	\$	0	
22c. /	Add line 22a and 22b. The resu	It is your monthly	expenses.			22c.	\$	2320W	
	e your monthly net income. ppy line 12 (your combined monthly income) from Schedule I.					23a.	\$ 1790	.00	
	Copy your monthly expenses fi					23b	-\$ <u>234</u> 0	. 00	
23c. Subtract your monthly expenses from your monthly income.						s -53	0.00		
The result is your monthly net income. 23c.						23c.			
or Dava	u expect an increase or decr	oaco in vour eyn	aneae within the w	vear after vou	file this form?				
-	-								
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?								
□ No		en da kermen sa sa sa sa manaka kanana kanana ka sa	nampannapopusanon is er est successor en en el constituent delle des el este el este el este el este el este e	et i er sammar namman nammanhari kersen er menkenkanka	gal turiffeljiri 1900 savgjeni kelasi viet similinen valensi oleh sini.		and addressed Addressed Transport Company Services and Facilities	kki tisangangan p	
☐ Ye	s. Explain here:								
	evility four little							accompany of the second	
	*10000000000000000000000000000000000000							The second secon	
	E-MANAGEMENTONIONALE SURVEY (STUDIES AND SELECTION SELEC	erater det de operate adoption de contracte à des la contracte à de de déposition des des l'estre de	is, as well-removed as the same it will be the first that the specified and specified and continue continue to	and i al inches had god god and god all mad and a supply by the state of the state	naar etandronau e en oarounduse hijn de fraktieren 1 verzent fan Súr en er et enn		e (d. 1 mg feature) y destauten sjoor I de regjer in de steeter in de retreat	on y processor for y procedure y a comment of the design of the comment of the co	

Filed 04/07/16 Case 16-11932 Doc 1 Entered 04/07/16 14:59:20 Desc Main Page 36 of 50 Document Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Ilivois Case number (If known) Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? ☐ No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 **Dates Debtor 2** lived there lived there Same as Debtor 1 Same as Debtor 1 2425 W. JACKSON BLVD. 07/14/2013 From Number Street Number Street 11/01/2015 Τo CHICAGO IL 60612 City State ZIP Code City State ZIP Code Same as Debtor 1 Same as Debtor 1 From Number Street City State ZIP Code State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☑ No

Explain the Sources of Your Income

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 37 of 50

Debtor 1	Don

Donald	Thomas
Etiddie Masse	1 net Name

Case number	(if known)	 	

If you are filing a joint case and you have inco No				
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$ 3976.00	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	\$ 37,071.00	Wages, commissions, bonuses, tips	\$
(January 1 to December 31, RD15	Operating a business	-	Operating a business	A Vision of the Control of the Contr
For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	\$
(January 1 to December 31, YYYY	Operating a business	Φ	Operating a business	<u> </u>
nclude income regardless of whether that incurrence income regardless of whether that incurrence income it pays a pambling and lottery winnings. If you are filing it each source and the gross income from a contract of the pross income from a part of the part of	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	s of other income are alint come; interest; dividends; we income that you receive	money collected from lawst ed together, list it only once	uits; royalites, and
Include income regardless of whether that inc unemployment, and other public benefit payn gambling and lottery winnings. If you are filing List each source and the gross income from o	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav each source separately. D	s of other income are alint come; interest; dividends; we income that you receive	money collected from lawst ed together, list it only once	uits; royallies, and
nclude income regardless of whether that incomendation income regardless of whether that incomendation incoments and other public benefit paying ambling and lottery winnings. If you are filing list each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	s of other income are alint come; interest; dividends; we income that you receive	money collected from lawsted together, list it only once tyou listed in line 4.	uits; royallies, and
nclude income regardless of whether that incomendation income regardless of whether that incomendation incoments and other public benefit paying ambling and lottery winnings. If you are filing list each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of income	s of other income are alimstome; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and	money collected from lawsted together, list it only once tyou listed in line 4. Debtor 2 Sources of income	under Debtor 1. Gross Income from each source (before deductions and
nclude income regardless of whether that incomemployment, and other public benefit payn ambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	come is taxable. Examples nents; pensions; rental inc g a joint case and you have each source separately. Debtor 1 Sources of income	s of other income are alimstome; interest; dividends; re income that you receive to not include income that Gross income from each source (before deductions and	money collected from lawsted together, list it only once tyou listed in line 4. Debtor 2 Sources of income	under Debtor 1. Gross income from each source (before deductions and
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Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 38 of 50

Debtor 1

Case number (if known)

	List Certain Payr	Helits Tou	i Made Beto	ore You Filed for Bankrup	tcy	
	her Debtor 1's or Del					
☐ No.	 Neither Debtor 1 neither incurred by an individual 	or Debtor 2 ⁄idual prima	has primarily	y consumer debts. Consumer onal, family, or household purpo	debts are defined in 11 U.Spse."	S.C. § 101(8) as
	During the 90 days	before you f	iled for bankru	uptcy, did you pay any creditor a	a total of \$6,225* or more?	
	No. Go to line 7	,				
	total amour	nt you paid t	hat creditor. D	u paid a total of \$6,225* or more to not include payments for dor not include payments to an attor	mestic support obligations, s	such as
				3 years after that for cases file	- · · ·	
☐ Yes	s. Debtor 1 or Debtor	2 or both h	nave primarily	consumer debts		
				ptcy, did you pay any creditor a	a total of \$600 or more?	
	No. Go to line 7.			,,, , ,	- 1010. 01 4000 0. 11010.	
	creditor. Do	not include	payments for	i paid a total of \$600 or more a domestic support obligations, nts to an attorney for this bankri	such as child support and	d that
	. 1			Dates of Total amount payment	paid Amount you stil	l owe Was this payment for
	<u> </u>			<u> </u>	<u> </u>	Mortgage
	Creditor's Name					Car
	Number Street			* A STATE OF THE S		☐ Credit card
						Loan repayment
	***************************************			***************************************		☐ Suppliers or vendors
	City	State	ZIP Code			Other
	Martin Carlot Advancy of the State of the State Control	A CREAT OF THE OWNER OF THE STATE OF THE STA	čes esioni sunessi i siesasesaani i inimisai	en et de transitet a tip a tip da tible e maan van de var dende verde minimer namen vanga a jed	t til er til til til til til til store og skiller for til	
				<u></u> \$	\$	
	Creditor's Name		* h - h - m - m - m - m - m - m - m - m -	<u> </u>	<u> </u>	——— ☐ Mortgage
				<u> </u>	<u> </u>	———
	Creditor's Name Number Street		**	<u> </u>	\$	Car
				<u> </u>	<u> </u>	☐ Car☐ Credit card☐ Loan repayment
	Number Street	State	ZID Corts	<u> </u>	<u> </u>	☐ Car☐ Credit card
		State	ZIP Code	<u> </u>	<u> </u>	☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
	Number Street	State	ZIP Code	\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other
	Number Street	State	ZIP Code	\$\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage
	Number Street City	State	ZIP Code	\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car
	Number Street City	State	ZIP Code	\$\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card
	Number Street City Crecitor's Name	State	ZIP Code	\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment
	Number Street City Crecitor's Name	State	ZIP Code	\$\$	\$\$	Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Page 39 of 50

Debtor 1

Donald		Document Thomas
Firet Name	Stiddle Mome	Local Manager

Case number (if known)_

such as child su					
☐ Yes. List all	payments to an insider.	Dates of	Total amount	Amount you still	Bassa for this payment
		payment	paid	owe	Reason for this payment
Insider's Name	9	****	\$	\$	
Number Str	eet	and and the state of the state			
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Oity	State ZiP Code	and a structure of the	e de la compansión de la compansión de compansión de la compansión de la compansión de la compansión de la comp	San	
Insider's Name	*	***		\$	
Number Stre	201	-			
	not.				
City Vithin 1 year be	State ZIP Code	ou make any payı	ments or transfe	er any property o	n account of a debt that benefited
City fithin 1 year be n insider? nclude payment	State ZIP Code	y an insider.	10 Visio Vigitas Cigaria (1)		
City fithin 1 year be in insider? include payment	State ZIP Code If ore you filed for bankruptcy, did y s on debts guaranteed or cosigned by		ments or transfe Total amount paid	er any property of Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
City fithin 1 year be in insider? include payment	State ZIP Code If ore you filed for bankruptcy, did y s on debts guaranteed or cosigned be because that benefited an insider.	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
City /ithin 1 year be n insider? nclude payment No No Yes. List all p	State ZIP Code If ore you filed for bankruptcy, did y s on debts guaranteed or cosigned by payments that benefited an insider.	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
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Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 40 of 50

Debtor 1

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~ i i		إسيسر		
		1600	•	
Jona !	L	Morra		
First Name	Middle Name	Last Nante		

Case number (if known)

thin 1 year before you filed for ba t all such matters, including persona d contract disputes.	nkruptcy, were al injury cases, s	you a party in any la mall claims actions, d	livorces, collection s	uits, paternity actions, supp	ort or custody modification
No					
Yes. Fill in the details.	s men socionie	tars desertare deservat versus de la cella	diseten ke värvikkisinistikisi		angi endekanterrentakan:
	Nature	of the case	Court or age	ency	Status of the case
Case title			Court Name	· · · · · · · · · · · · · · · · · · ·	Pending
	and desirable dis-		er e		On appeal
			Number Stree	t	Concluded
	Annich		and through		
Case number	Transport of the second of the		City	State ZIP Code	
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					Pending
Case title			Court Name		On appeal
					Concluded
			Number Stree	et	Concluded
Case number					M-M-Trace
•			City	State ZIP Code	
neck all that apply and fill in the deta	inkruptcy, was iils below	any of your property Describe the prope		eclosed, garnished, attach	ed, seized, or levied? Value of the property
neck all that apply and fill in the deta No. Go to line 11.	inkruptcy, was	ja stylky michanikasi kiriki		olan landing on do shalifigh	elegis protessis sississis pepil
neck all that apply and fill in the deta	inkruptcy, was	ja stylky michanikasi kiriki		olan landing on do shalifigh	n de profession de descripto per pro-
neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name	inkruptcy, was	ja stylky michanikasi kiriki	rity	olan landing on do shalifigh	n de profession de descripto per pro-
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neck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's ::ame	ils below.	Explain what happ Property was Property was Property was Property was Property was Explain what happ	ened s repossessed. s foreclosed. s garnished. s attached, seized, o erty	Date	Value of the property \$
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Case number (if known) Debtor 1 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. Amount Date action Describe the action the creditor took was taken Creditor's Name Number Street Last 4 digits of account number: XXXX-_____ ZIP Code State City 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? **∡** No ☐ Yes **List Certain Gifts and Contributions** Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? M No Yes. Fill in the details for each gift. Value Dates you gave Describe the gifts Gifts with a total value of more than \$600 the gifts per person Person to Whom You Gave the Gift Number Street ZIP Code City Person's relationship to you Dates you gave Describe the gifts Gifts with a total value of more than \$600 the gifts per person Person to Whom You Gave the Gift Number Street ZIP Code City State Person's relationship to you.

Case 16-11932 Doc 1

Filed 04/07/16

Document

Entered 04/07/16 14:59:20 Desc Main

Page 41 of 50

Document Page 42 of 50 Debtor 1 Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Z No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☑ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Z No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street City State ZiP Code Email or website address Person Who Made the Payment, if Not You

Case 16-11932

Doc 1

Filed 04/07/16

Entered 04/07/16 14:59:20

Desc Main

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 43 of 50

Cantar	4	

	Description and value of any property transf	erred	Date payment or	Amount of
			transfer was made	payment
Person Who Was Paid	***************************************			\$
Number Street	Comment of the Commen			
		17 17 17 17 17 17 17 17 17 17 17 17 17 1		\$
City State ZIP Code		mend (I maktic jakstyr)		
Email or website address				
Person Who Made the Payment, if Not You		taled made abbots		
Yes. Fill in the details.	Description and value of any property transi	erred	Date payment or	Amount of payn
No Yes, Fill in the details.				
	Description and value of any property transl	erred	Date payment or transfer was	Amount of payr
Person Who Was Paid	And the state of t	An annual file for the section of th	made	
Latanii AAlin AAsa Lain				\$
Number Street	•			
	•	,	***************************************	\$
·		!		
City State ZIP Code	otcy, did you sell, trade, or otherwise tran		anyone, other tha	n property
lithin 2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise tran business or financial affairs? made as security (such as the granting of a s ve already listed on this statement.	sfer any property to	ortgage on your pro	
fithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers ro not include gifts and transfers that you ha	otcy, did you sell, trade, or otherwise tran business or financial affairs? made as security (such as the granting of a some already listed on this statement. Description and value of property.	sfer any property to	ortgage on your pro	perty).
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Aithin 2 years before you filed for bankrup ansferred in the ordinary course of your acclude both outright transfers and transfers ro not include gifts and transfers that you had not not include gifts and transfers that you had not not include gifts and transfers that you had not not include gifts and transfers that you had not not include gifts and transfers that you had not include gifts and transfers that you had not include gifts and transfers. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	otcy, did you sell, trade, or otherwise tran business or financial affairs? made as security (such as the granting of a s ve already listed on this statement. Description and value of property	sfer any property to security interest or m	ortgage on your pro	perty). Date transfe
Fithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers ro not include gifts and transfers that you had not not include gifts and transfers that you had not not include gifts and transfers that you had not not include gifts and transfers that you had not not include gifts and transfers that you had not include gifts and transfers. Person Who Received Transfer Person's relationship to you	otcy, did you sell, trade, or otherwise tran business or financial affairs? made as security (such as the granting of a s ve already listed on this statement. Description and value of property	sfer any property to security interest or m	ortgage on your pro	perty). Date transf

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 44 of 50 Case number (if known)_ Debtor 1 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ΣΖÍNο Yes. Fill in the details. Date transfer Description and value of the property transferred was made Name of trust ___ Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last balance before Date account was Type of account or Last 4 digits of account number closing or transfer closed, sold, moved, instrument or transferred Name of Financial Institution ☐ Checking XXXX-__ __ __ Savings Number Street Money market ☐ Brokerage Other_ ZIP Code City State ☐ Checking XXXX-___ ___ Name of Financial Institution ☐ Savings Money market Number Street ■ Brokerage Other__ ZIP Code State 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ₩ No Yes. Fill in the details. Do you still Describe the contents Who else had access to it? have it? ☐ No ☐ Yes Name Name of Financial Institution Number Street Number Street ZIP Code City State

ZIP Code

City

	Case 16-11932	Doc 1	Filed 04/07/16 Document	Entered 0 Page 45 of	4/07/16 14:59:20 50	Desc Main
Debtor 1	Donald	Tho	mes	Cas	se number (# known)	
Debies .	First Name Middle Name	Last Name				
₩ No	ou stored property in a stora s. Fill in the details.	ge unit or pl	lace other than your h	ome within 1 year	r before you filed for bank	
		V	Vho else has or had acces	s to it?	Describe the contents	Do you still have it?
N	Name of Storage Facility	N	ame			☐ No ☐ Yes
,	Number Street	N	lumber Street		•	
_			CityState ZIP Code			The Addition of the Addition o
7	City State ZI	P Code	e Santas Sanyangan ay a taona da da ana a a anna a taona taona a taona a taona a taona a taona a taona a taona	agga sina adalah adalah diberah menengan adalah Mari Ma	ise fine y a major grown mene i a a man a region a tank mene e na a antizen e tank mene en en entre	tagang ng makka kada ay kalangay kabanan na mahalifu a minibuka di katawa kang akiba kaba at ka ta
Part 9:	Identify Property You	u Hold or C	Control for Someone	Else		
No. No. of the Control of the Contro	es. Fill in the details.	W	Where is the property?		Describe the property	Value \$
•	CMusi 2 liquite	No	umber Street			
-	Number Street	Nu	HUDEL OFFER		-	
		Cil	ty	itate ZIP Code	=	
Part 10	Chy Charles III	IP Code Environme i	ntal Information		Эх дания это финосов, как их со стиненной «Колон се е е е е е е е е е е е е е е е е е е	
For the	purpose of Part 10, the follow	ving definition	ons apply:			
Envii haza inclu	ironmental law means any fed ardous or toxic substances, v ading statutes or regulations	deral, state, e vastes, or m controlling	or local statute or regu aterial into the air, land the cleanup of these s	a, soii, surrace w ubstances, waste	es, or material.	i iliouium,
utiliz	means any location, facility, ze it or used to own, operate,	or utilize it,	including disposal site	es.		
Haza subs	ardous material means anyth stance, hazardous material, p	ing an envir collutant, co	onmental law defines a ntaminant, or similar t	as a hazardous w erm.	vaste, hazardous substand	ce, toxic
: "	all notices, releases, and pro					daa uuramtal lave?
24. Has a	any governmental unit notific	ed you that y	ou may be liable or po	tentially liable ur	nder or in violation of an e	nyironmentai iaw r
Ø N	No Yes. Fill in the details.					

State ZIP Code

Governmental unit

Number Street

City

ZIP Code

State

City

Name of site

Number Street

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main

Debtor	1

Document	Page 46 of 50
First Name Middle Name Last Name	Case number (I known)
ou notified any governmental unit of any release of hazardous	material?

	Governmental unit Environmenta	al law, if you know it Date of notice
Name of site	Governmental unit	
Number Strect	Number Street	400
	City State ZIP Code	
City State ZIP (The form the control of the control	
łave you been a party in any judicia	al or administrative proceeding under any environmen	tal law? include settlements and orders.
√ No		
Yes. Fill in the details.	Court or agency Nature	of the case Status of the case
Case title		☐ Pending
Case title	Court Name	On appe
	Number Street	☐ Conclud
Case number	City State ZIP Gode	
rt 11: Give Details About Yo	bankruptcy, did you own a business or have any of the	
☐ A member of a limited liabil ☐ A partner in a partnership ☐ An officer, director, or man: ☐ An owner of at least 5% of the above applies.	nployed in a trade, profession, or other activity, either lity company (LLC) or limited liability partnership (LLP agging executive of a corporation the voting or equity securities of a corporation. Go to Part 12. e and fill in the details below for each business.	Employer Identification number
LE 185. Clieck all tilat apply about	Describe the nature of the business	Employer identification number
	Describe the nature of the business	Do not include Social Security number or ITIN
Business Name	Describe the nature of the business	Do not include Social Security number or ITIN
	Describe the nature of the business Name of accountant or bookkeeper	Do not include Social Security number or ITIN
Business Name	Describe the nature of the business	Do not include Social Security number or ITIN
Business Name Number Street	Name of accountant or bookkeeper	Do not include Social Security number or ITIN EIN:
Business Name Number Street	Describe the nature of the business	Do not include Social Security number or ITIN EIN:
Business Name Number Street	Name of accountant or bookkeeper	Do not include Social Security number or ITIN EIN:
Business Name Number Street City State Z	Name of accountant or bookkeeper	Do not include Social Security number or ITIN EIN:
Business Name Number Street City State Z Business Name	Name of accountant or bookkeeper Per Code Describe the nature of the business	Do not include Social Security number or ITIN EIN:
Business Name Number Street City State Z Business Name	Name of accountant or bookkeeper Per Code Describe the nature of the business	Do not include Social Security number or ITIN EIN:

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 47 of 50

Business Name Name of accountant or bookkeeper Dates business existed	First Name Middle Name	Thomas S Last Name	Case number (J known)
Name of accountant or bookkseper Dates business existed	артуна (д. 1974) 1974 г. регундарска на того сред съвения да на наприна прина написа съ се во сторо се се пост	Describe the nature of the busin	ess Employer identification number Do not include Social Security number or ITIN.
City State ZIP Code From	Business Name		EIN:
City State ZIP Code Inin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the issuers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date Signature of Debtor 2 Date Date Date Joy ou attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)? No Yes Id you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Number Strect	Name of accountant or bookkee	per Dates business existed
hin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial titutions, creditors, or other parties. No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code Late any and any attachments, and I declare under penalty of perjury that the issues are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. U.S.C. §§ 162, 1341, 1519, and 3571. Signature of Debtor 1 Date Signature of Debtor 2 Date Date Date Date Date Date Date Date	City State 7IP Co		From To
Name Name			
Name Number Street			tement to anyone about your business? Include all financial
Number Street City State ZIP Code Sign Below Again and any attachments, and I declare under penalty of perjury that the issuers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date			
Sign Below State Zip Code	res. I iii iii die details solow.		
Sign Below Take read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the aswers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. SU.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date OF 36 30 16 Date Date Date OF 36 30 16 Date Date OF 36 30 16 Date OF 36 30 16 Date Date OF 36 30 16 Date Date OF 36 30 16 Date Date OF 36 30 16 No Yes Individuals Filling for Bankruptcy (Official Form 107)? No Yes			
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Signature of Debtor 1 Date Od 26/2016 Date down additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes d you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	2: Sign Below		
Signature of Debtor 2 Date O2/26/2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	have read the answers on this Statenswers are true and correct. I under connection with a bankruptcy cas	erstand that making a false statemen se can result in fines up to \$250,000,	it, concealing property, or obtaining money or property by ita
Date id you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes You pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	& Donald Thou	w.A.	
id you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes id you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Signature of Debtor 1	Signature of D	ebtor 2
d you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes d you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	- an Inclinate	Data	
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d you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	• • • • • • • • • • • • • • • • • • •	i vui Qlateineilt VI i mailviai Andli 3 it	or many manner a man and an amount about the control of the contro
Í No	1 No		
	1 No		
Pes. Name of person	No Yes id you pay or agree to pay someor		

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 48 of 50

Fill in this in	formation to identify	your case:	
Debtor 1	Donald Thomas	Middle Name	Last Name
Debtor 2 (Spouse, if filing)		Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern District o	f Illinois
Case number (If known)			Name of the State

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor a	and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	AVA	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	☐ Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
scenning door.		Retain the property and [explain]:	
Creditor's		☐ Surrender the property.	No
name:		Retain the property and redeem it.	☐ Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
oodinig door.		Retain the property and [explain]:	
Creditor's	oppropries and processes and the second seco	☐ Surrender the property.	□ No
name:	yyyymys achinamatymiatymiatymiatymy y telefa y fylysynyn, ame a ameanad wym i a ei ei fa fylys	Retain the property and redeem it.	☐ Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
securing debt.		Retain the property and [explain]:	
Creditor's	MANABAT MA	☐ Surrender the property.	☐ No
name: 	ggg programmen og konstruktig pog konstruktig konstruktig og dette 200 til 15 til 10 mil 200 til 10 mil 10 miljon kantigen kantigen kantigen konstruktig konstrukt	Retain the property and redeem it.	Yes
Description of property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	-
Jooding dobt.		Retain the property and [explain]:	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 49 of 50

Debtor 1

Donald	Thomas
Donaid	THOMAG

Last Name

Case number (if known)___

rany unexpired personal property lease that you listed in Schedule G: Executory Contracts in the information below. Do not list real estate leases. Unexpired leases are leases that are led. You may assume an unexpired personal property lease if the trustee does not assume	still in effect; the lease period has not yet
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: A care Pormant Management 1td	☑ No
Lessor's name: Acom Property Management Ltd. Description of leased property: Studio Apartment	Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	Yes
rt 3: Sign Below	
Inder penalty of perjury, I declare that I have indicated my intention about any property of mersonal property that is subject to an unexpired lease.	y estate that secures a debt and any
Lonal Thomas *	
Signature of Debtor 1 Signature of Debtor 2	
Date <u>U2/26 / 2016</u> Date <u>MM / DD / YYYY</u>	

Case 16-11932 Doc 1 Filed 04/07/16 Entered 04/07/16 14:59:20 Desc Main Document Page 50 of 50

Debtor 1 DONALD THOMAS

First Name Middle Name Last Name

Debtor 2 (Spouse, if filling) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District of Illinois

Case number (If known)

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the	ne summary and schedules filed with this declaration and
that they are true and correct.	
at 7 m	
· 90 00 40	×
	Signature of Debtor 2
Signature of Debtor 1	Signature of Debtor 2
- M7/78/2016	Date
Date MM/ DD // YYYY	MM / DD / YYYY
	Did you pay or agree to pay someone who is NOT ar ✓ No